



Food and Drug Administration
10903 New Hampshire Avenue
Document Control Center – WO66-G609
Silver Spring, MD 20993-0002

ONEFIT medical
% Mr. Julien Simon
Research and Development Manager
18 Rue Alain Savary
25000 Besancon
FRANCE

December 5, 2014

Re: K142671
Trade/Device Name: ONEFIT Hip Planner
Regulation Number: 21 CFR 892.2050
Regulation Name: Picture archiving and communications system
Regulatory Class: II
Product Code: LLZ
Dated: September 15, 2014
Received: September 26, 2014

Dear Mr. Simon:

We have reviewed your Section 510(k) premarket notification of intent to market the device referenced above and have determined the device is substantially equivalent (for the indications for use stated in the enclosure) to legally marketed predicate devices marketed in interstate commerce prior to May 28, 1976, the enactment date of the Medical Device Amendments, or to devices that have been reclassified in accordance with the provisions of the Federal Food, Drug, and Cosmetic Act (Act) that do not require approval of a premarket approval application (PMA). You may, therefore, market the device, subject to the general controls provisions of the Act. The general controls provisions of the Act include requirements for annual registration, listing of devices, good manufacturing practice, labeling, and prohibitions against misbranding and adulteration. Please note: CDRH does not evaluate information related to contract liability warranties. We remind you, however, that device labeling must be truthful and not misleading.

If your device is classified (see above) into either class II (Special Controls) or class III (PMA), it may be subject to additional controls. Existing major regulations affecting your device can be found in the Code of Federal Regulations, Title 21, Parts 800 to 898. In addition, FDA may publish further announcements concerning your device in the Federal Register.

Please be advised that FDA's issuance of a substantial equivalence determination does not mean that FDA has made a determination that your device complies with other requirements of the Act or any Federal statutes and regulations administered by other Federal agencies. You must comply with all the Act's requirements, including, but not limited to: registration and listing (21 CFR Part 807); labeling (21 CFR Part 801); medical device reporting (reporting of medical device-related adverse events) (21 CFR 803); good manufacturing practice requirements as set forth in the quality systems (QS) regulation (21 CFR Part 820); and if applicable, the electronic product radiation control provisions (Sections 531-542 of the Act); 21 CFR 1000-1050.

If you desire specific advice for your device on our labeling regulation (21 CFR Part 801), please contact the Division of Industry and Consumer Education at its toll-free number (800) 638 2041 or (301) 796-7100 or at its Internet address

<http://www.fda.gov/MedicalDevices/ResourcesforYou/Industry/default.htm>. Also, please note the regulation entitled, “Misbranding by reference to premarket notification” (21 CFR Part 807.97). For questions regarding the reporting of adverse events under the MDR regulation (21 CFR Part 803), please go to

<http://www.fda.gov/MedicalDevices/Safety/ReportaProblem/default.htm> for the CDRH’s Office of Surveillance and Biometrics/Division of Postmarket Surveillance.

You may obtain other general information on your responsibilities under the Act from the Division of Industry and Consumer Education at its toll-free number (800) 638-2041 or (301) 796-7100 or at its Internet address

<http://www.fda.gov/MedicalDevices/ResourcesforYou/Industry/default.htm>.

Sincerely yours,

A handwritten signature in black ink that reads "Robert A. Ochs". The signature is written in a cursive style. In the background, there is a faint, large, light-gray watermark of the letters "FDA".

for

Janine M. Morris
Director
Division of Radiological Health
Office of In Vitro Diagnostics
and Radiological Health
Center for Devices and Radiological Health

Enclosure

DEPARTMENT OF HEALTH AND HUMAN SERVICES
Food and Drug Administration

Indications for Use

Form Approved: OMB No. 0910-0120
Expiration Date: January 31, 2017
See PRA Statement on last page

510(k) Number (if known)
Unknown K142671

Device Name
ONEFIT Hip Planner

Indications for Use (Describe)

The ONEFIT Hip Planner software is indicated for assisting healthcare professionals in preoperative planning of hip replacement surgery. The software allows for overlaying of 3D/2D implant models on radiological images and 3D reconstruction of bone, and includes tools for performing measurements on the image and 3D model of bones and for selecting and positioning the implant model. Clinical judgments and experience are required to properly use the software.

Type of Use (Select one or both, as applicable)

☒ Prescription Use (Part 21 CFR 801 Subpart D)
Subpart C)

☐ Over-The-Counter Use (21 CFR 801

PLEASE DO NOT WRITE BELOW THIS LINE – CONTINUE ON A SEPARATE PAGE IF NEEDED.

FOR FDA USE ONLY

Concurrence of Center for Devices and Radiological Health (CDRH) (Signature)

This section applies only to requirements of the Paperwork Reduction Act of 1995.

DO NOT SEND YOUR COMPLETED FORM TO THE PRA STAFF EMAIL ADDRESS BELOW.

The burden time for this collection of information is estimated to average 79 hours per response, including the time to review instructions, search existing data sources, gather and maintain the data needed and complete and review the collection of information. Send comments regarding this burden estimate or any other aspect of this information collection, including suggestions for reducing this burden, to:

Department of Health and
Human Services Food and
Drug Administration
Office of Chief Information Officer
Paperwork Reduction
Act (PRA) Staff
PRASStaff@fda.hhs.gov

"An agency may not conduct or sponsor, and a person is not required to respond to, a collection of information unless it displays a currently valid OMB number."

510(k) SUMMARY
ONEFIT's ONEFIT Hip Planner

Submitter

ONEFIT medical

18, rue Alain Savary
25000 Besançon
France

Phone: +33 3 81 25 24 27

Facsimile: +33 3 81 25 53 51

Contact Person: Julien SIMON – ONEFIT medical – Research and development Manager

Date Prepared: December 4, 2014

Device

Name of Device: ONEFIT Hip Planner

Common or Usual Name: Radiological image processing system

Classification Name: Picture Archiving and Communication System (21 CFR 892.2050)

Regulatory Class: II

Product Code: LLZ

Predicate Devices

TraumaCAD Release 2.0 (K073714) by Orthocrat, Ltd.

Intended Use/Indications for Use

The ONEFIT Hip Planner software is indicated for assisting healthcare professionals in preoperative planning of hip replacement surgery. The software allows for overlaying of 3D/2D implant models on radiological images and 3D reconstruction of bone, and includes tools for performing measurements on the image and 3D model of bones and for selecting and positioning the implant model. Clinical judgments and experience are required to properly use the software.

Device Description

The ONEFIT Hip Planner software allows surgeons to perform pre-operative surgical planning for hip replacement. The program features an extensive regularly updated library of digital 3D models of implants from leading implant manufacturers. It allows the overlay of the 3D/2D implant models on the radiological images and on the 3D reconstruction and permits the selection of appropriate size and position of implant. ONEFIT Hip Planner is accessible on any computer via ONEFIT Management System that provides secure internet interface through authentication mechanisms, web accessible authentication servers and access for authorized users through secure protocols to web server.

Comparison of Technological Characteristics with the predicate device

Like TraumaCAD, ONEFIT Hip Planner is accessible on any computer via secure internet interface via ONEFIT Management System. Both software programs are cloud-based networks that provide a secure environment to access, control, and share diagnostic images.

ONEFIT Hip Planner uses a graphic interface titled hipEOS that displays PNG compressions of DICOM radiological images generated by the EOS Imaging System (K071546) and/or a 3D reconstruction of bones, in STL format, created from EOS images using the SterEOS Workstation (K141137) by radiologists. TraumaCAD Release 2.0 uses the radiological, CT-Scan or RM images in DICOM format or in a JPEG compression. Both programs feature an extensive regularly updated library of digital 3D/2D models of implants from leading implant manufacturers. They allow the overlay of the 3D/2D implant models on the radiological images and, for ONEFIT Hip Planner, on the 3D reconstruction. Both software programs permit the user to select implant size and position.

To use ONEFIT Hip Planner, radiologists select anatomic landmarks on the 3D models during the 3D reconstruction using the SterEOS Workstation. ONEFIT Hip Planner uses these landmarks to compute the pre-planning and the post-planning of the anatomic measurements displayed on the hipEOS interface. With TraumaCad, the surgeon can select the anatomic landmarks during the planning and the software provides pre-planning and post-planning measurements on the radiological images.

The ONEFIT Hip Planner has the same intended use and similar indications, technological characteristics, and principles of operation as its predicate device. The minor technological differences between the ONEFIT Hip Planner and its predicate device raise no new issues of safety or effectiveness. Performance data demonstrate that ONEFIT Hip Planner is as safe and effective as TraumaCAD Release 2.0 (K073714). Thus, the ONEFIT Hip Planner is substantially equivalent.

Performance Data

Software verification and validation testing were conducted and documentation was provided as recommended by FDA's Guidance for Industry and FDA Staff, "Guidance for the Content of Premarket Submissions for Software Contained in Medical Devices."

Conclusions

The device has the same intended use, and similar indications for use, technological characteristics, and principles of operation as its predicate device. The minor differences between the device and its predicate device raise no new issues of safety or effectiveness. Performance data demonstrate that the device is as safe and effective as its predicate and, thus, is substantially equivalent.